

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>OHIO VOTER FUND POLITICAL ACTION COMMITTEE</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00621995       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>OVF PAC payroll</b> <b>[MEMO ITEM]</b> estimated November 1-8		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">11 / 01 / 2016</div> </div>	
Mailing Address 20 S 3rd St Suite 210		Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>19000.00</span> </div>	
City State Zip Code Columbus OH 43215	<b>Transaction ID : WFT20161011959-1</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> </div>		
Purpose of Expenditure November canvassers estimated	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Name of Federal Candidate Hillary, Clinton, , ,	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>75958.00</span> </div>		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>75958.00</span> </div>	

Full Name of Payee <b>OVF PAC payroll</b> <b>[MEMO ITEM]</b> estimated November 1-8		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">11 / 01 / 2016</div> </div>	
Mailing Address 20 S 3rd St Suite 210		Amount <div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>19000.00</span> </div>	
City State Zip Code Columbus OH 43215	<b>Transaction ID : WFT2016101205-1</b> Date of Disbursement or Obligation <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> </div>		
Purpose of Expenditure November canvassers estimated	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	Name of Federal Candidate Donald, Trump, , ,	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>75958.00</span> </div>		<div style="border: 1px solid black; padding: 2px; display: flex; justify-content: space-between;"> <span></span> <span>75958.00</span> </div>	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	0
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

David, Holt, , ,

[Electronically Filed]

Date

MM / DD / YYYY

11 / 01 / 2016

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>OHIO VOTER FUND POLITICAL ACTION COMMITTEE</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00621995	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>OVF PAC payroll</b> <input checked="" type="checkbox"/> estimated November 1-8		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 01 / 2016</b>	
Mailing Address 20 S 3rd St Suite 210		Amount <b>19000.00</b>	
City Columbus	State OH	Zip Code 43215	Transaction ID : <b>WFT2016101206-1</b>
Purpose of Expenditure November canvassers estimated		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Ted, Strickland, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought		<b>75958.00</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>OVF PAC payroll</b> <input checked="" type="checkbox"/> estimated November 1-8		Date of Public Distribution/Dissemination MM / DD / YYYY <b>11 / 01 / 2016</b>	
Mailing Address 20 S 3rd St Suite 210		Amount <b>19000.00</b>	
City Columbus	State OH	Zip Code 43215	Transaction ID : <b>WFT2016101207-1</b>
Purpose of Expenditure November canvassers estimated		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Rob, Portman, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>OH</b>
Calendar Year-To-Date Per Election for Office Sought		<b>75958.00</b>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>0.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	<b>38000.00</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

David, Holt, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**11 / 01 / 2016**

Signature